

Problem Gambling

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Missouri proudly hosted the first Midwest Conference on Problem Gambling and Substance Abuse (Midwest Conference) as a featured event of Missouri's Responsible Gaming Education Month 2004. Numerous other significant advances were also made in proactively addressing problem gambling in Missouri during the past fiscal year. These advances include the implementation of a "real-time" database for the Voluntary Exclusion Program, the initiation of independent research on the efficacy of the Voluntary Exclusion Program, the first inclusion of gambling assessment on a statewide risk factor survey, expansion of outreach and education efforts, the adoption of a "Code of Conduct for Responsible Gaming" by the American Gaming Association (of which all Missouri Class A Licensees are members) and investigation of a proposed revision to the Voluntary Exclusion Program to expand its utility as a recovery tool for problem gamblers.

2004 Midwest Conference on Problem Gambling and Substance Abuse – Not only was this conference a highlight of the year for the Missouri Alliance to Curb Problem Gambling (Alliance), it was also the attainment of a key goal of the Alliance's strategic plan. The Missouri Gaming Commission and other Alliance members collaborated with representatives from a variety of state agencies and organizations in Iowa, Kansas and Nebraska to facilitate this regional conference and to jointly apply for a grant from the Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services.

Approximately 200 treatment providers, regulators, industry personnel and members of the criminal justice system attended this landmark event to learn from some of the nation's most renowned experts in the fields of problem gambling and substance abuse. A provocative pre-conference plenary on public policy issues with regard to problem gambling, substance abuse and other co-occurring mental disorders launched the conference. The Midwest Conference concluded with a second plenary on state responses to the issues. These two plenary sessions, as well as each of the keynote presentations and many of the workshops, were videotaped for future reference by attendees, organizers and public policy officials.¹

Public Health Model – The need to utilize a public health approach in addressing problem gambling, substance abuse and related mental illnesses was a recurring thread noted by presenters throughout the Midwest Conference. The expansion of both legalized and illegal gambling opportunities challenges us to focus on the broad implications for both individual and community health. A public health model is well-suited to address matters of healthy public policy, burden of illness, lifestyle behaviors and promotion of healthy decisions. Through seeking to understand the distribution and determinants of gambling problems in the general population and among subgroups, as well as the potential benefits, there is opportunity to develop effective strategies to protect vulnerable people, foster healthy gambling, where appropriate, and improve the quality of community life.

A multi-dimensional public health framework could stimulate a better understanding of gambling, help to illuminate the determinants of problem and pathological gambling, its potential consequences and the various opportunities for multi-level interventions.²

Additional Resources:

- 1-888-BETSOFF Problem Gambling Helpline
- Free Compulsive Gambling Treatment Services for Missouri problem gamblers and their family members
- Casino Self-Exclusion and/or Self-Limiting Programs
- Underage Gambling and Other Addiction Prevention Programs
- www.888betsoff.com
- www.mgc.dps.mo.gov



¹ Please visit the conference Web site at <http://www.888betsoff.com/links/midwest-conference.shtm> for a full list of presenters, agenda items, sponsors and details on obtaining audiotapes/videotapes of the conference sessions. Details for the 2005 Conference can also be obtained at this address as they become available.

² Shaffer, H.J., & Korn, D.A. (2002). *Gambling and Related Mental Disorders: A Public Health Analysis*. Annual Review Public Health, vol. 23, p. 171-212.



Like most public health issues, gambling involves a complex relationship among multiple determinants. When applied to gambling, the public health paradigm invites consideration of a broad array of prevention, harm minimization and treatment strategies targeting various elements of the model.

Generally speaking, four steps are recommended:

1. Adopt strategic goals for gambling that provide a focus for public health action and accountability;
2. Endorse public health principles. The following are three primary principles:
 - a. Ensure prevention is a community priority.
 - b. Incorporate a multi-faceted mental health promotion approach.
 - c. Foster personal and social responsibility for gambling policies and practices.
3. Adopt harm reduction strategies.
4. Allocate appropriate resources to identify and treat problem gamblers prior to their possible progression to pathological gambling.

Missouri took its first steps toward a proactive public health model for problem gambling with the formation of the Missouri Alliance to Curb Problem Gambling (Alliance) in 1997. The Alliance, of which the Missouri Gaming Commission is an active member, brings together diverse groups who share a common interest of working on issues relating to problem gambling and consists of both governing and participating members.³ The Alliance is a pivotal component in Missouri's innovative and comprehensive program to address public health implications of gambling and problem gambling.

Enhancements to the Voluntary Exclusion Program – A new database for the Voluntary Exclusion Program was launched in July 2003, ushering in significant advances in the processing of applications for placement on the List of Disassociated Persons (List).⁴ With the new database, the time necessary to review and approve new applications has been reduced significantly. It is now possible for the applications to be entered into the database directly at the office where the application was initiated. Once the application has been entered into the database, it is immediately available for viewing by staff in the Jefferson City office, as well as the enforcement staff of the Missouri Gaming Commission (Commission) located in each of the field offices. Applications can be reviewed for validity and completeness as soon as they are entered and scanned into the new database. Furthermore, Commission staff members now have the ability to view all pending and invalid applications.

³ Governing members sharing the responsibility of administering the Alliance programs, include: the Missouri Council on Problem Gambling Concerns, Inc., a non-profit advocacy group for problem gamblers; the Missouri Department of Mental Health; the Missouri Gaming Commission; the Missouri Lottery; the Port Authority of Kansas City; and the Missouri Riverboat Gaming Association, a private trade organization that represents riverboat casino operators. Participating members are non-voting members who desire to participate in Alliance activities and share their unique expertise and viewpoints to assist in comprehensively addressing problem gambling issues in the state. Participating members could include local government entities that host licensed gambling activities, private social service organizations, mental health advocates, researchers, counselors and counseling agencies, education institutions, consumer credit counseling agencies, charitable gaming operators and chambers of commerce. For more information about the Alliance or becoming a participating member, please contact Melissa Stephens at 573-526-4080.

⁴ The program is formally called the List of Disassociated Persons. The provisions of the program can be found at 11 CSR 45-17 et. seq.

Once an application is approved as valid and complete, the record status is updated to reflect that it is an approved record, and it is immediately available to Class A licensees for download, as well as for queries, such as when an individual seeks to cash a check or request a player card. Class A licensees have the ability to accomplish the download and queries at any time of day or night. The implementation of this database has significantly decreased the amount of time necessary to process a new application for placement on the List, as well as the time delay between the application process and the casino's notification of new placements on the List, thereby enhancing the benefit of the program as an effective tool for recovering problem gamblers.

As Executive Director Kevin Mullally noted to the Joint Committee on Gaming and Wagering earlier this year, the Commission has also been actively investigating and drafting a proposed revision to the Voluntary Exclusion Program to better address the needs of our citizens. This program was developed in 1996 in response to a request from a citizen who recognized the need for an external tool to self-exclude from all casinos in the state as a part of his recovery program. At that time, the consensus among treatment professionals and researchers was that there is no cure for pathological gambling and therefore the program should be for life with no provision for removal.

We have again received requests from residents who are seeking a problem gambling tool that fits their needs, and in response to these requests, as well as recent research, we have been investigating revising the program to offer a "menu" of self-exclusion options. While the research and treatment communities still advocate that pathological gamblers are unable to resume gambling activity in a responsible manner, recent research also indicates that many individuals who experience problems from their gambling activity do not necessarily progress to the more extreme level of pathological gambler and may only experience episodic gambling problems during a traumatic life event, such as a divorce or loss of a loved one. These individuals could potentially benefit greatly from a tool that allows them to self-exclude statewide for a pre-set period of time. Furthermore, there are also a number of pathological gamblers who have expressed that they are not yet ready to commit to a lifetime self-exclusion, but are interested in some other period of self-exclusion. Anecdotal evidence has shown that many of these individuals exclude with individual Class A licensees and later choose to place themselves on the List. Therefore, they too could benefit from availability of increased time frame options for the self-exclusion period.

The analysis of the current research and development of the proposed revision is ongoing at this point, but the Commission plans to formally present the proposal prior to the end of 2004.⁵

There are currently more than 7,200 individuals on the List and approximately 115 applications are received each month.

Missouri Problem Gambling Research in Progress – Shaffer and Korn noted a comprehensive research agenda is needed for the gambling field. During FY 2004, the Alliance was able to achieve another goal of securing research on problem gambling issues in Missouri. There are currently two statewide studies in progress that address problem gambling – an evaluation of the Voluntary Exclusion Program and the addition of three gambling questions to the 2004 Behavioral Risk Factor Surveillance System (BRFSS).

In October 2003, the Institute for Research on Pathological Gambling and Related Disorders, a



⁵ Updates on the status of this proposed revision to 11 CSR 45-17 et. seq. can be accessed at <http://www.mgc.dps.mo.gov>.

research program at Harvard Medical School's Division on Addictions was awarded a grant from the Greater Kansas City Community Foundation to execute a landmark study of Missouri Voluntary Exclusion. The two-year study will be accomplished in two phases and is notable on two counts – it is the first-ever scientific investigation of a statewide self-exclusion program, and to our knowledge it has the largest sample size of any scientific study of problem gamblers. There were more than 6,000 individuals in the program at the commencement of the study. Phase One includes a demographic assessment of the Voluntary Exclusion Program and the results of Phase One are anticipated to be received by the end of 2004. Phase Two will include a telephone survey of individuals on the List to evaluate the effectiveness of the program as a pipeline for treatment, recovery tool for problem gamblers and to identify potential strengths and weaknesses of the program.

The Department of Health and Senior Services added three questions to the annual BRFSS survey in January 2004. This annual survey is accomplished with support from the National Center for Chronic Disease Prevention and Health Promotion (CDC).⁶ The BRFSS is the world's largest telephone survey; it tracks health risks in the United States. Information from the survey is used to improve the health of the American people. The basic philosophy is to collect data on actual behaviors rather than on attitudes or knowledge that is especially useful for planning, initiating, supporting and evaluating health promotion and disease prevention programs.

CDC developed a standard core questionnaire for states to use to provide data that could be compared across states. Individual states are allowed to add questions to the core questionnaire to evaluate additional public health issues within the state. The 2004 BRFSS results will be available in summer 2005.

Education and Outreach

Responsible Gaming Education Month (RGEM) – Governor Bob Holden officially proclaimed August 2004 Missouri Responsible Education Month.⁷

RGEM 2004 events included an educational exhibit at the 2004 Missouri Black Expo; an exhibit, two focus groups and an educational track on underage addiction prevention and problem gambling issues at the Statewide Prevention Conference; and hosting the Midwest Conference on Problem Gambling and Substance Abuse. Class A licensees also audited their own properties and the properties of their fellow members of the Missouri Riverboat Gaming Association to ensure full compliance with the American Gaming Association's Code of Conduct for Responsible Gaming.⁸

Speakers Bureau and Traveling Educational Exhibits – The Missouri Gaming Commission participated in more than 20 speaking engagements and exhibits during FY 2004. ⁹Through these efforts Commission staff provided gambling outreach services to more than 60,000 individuals.

Speakers are available to provide presentations to groups and organizations throughout the state on a variety of topics relating to problem gambling and the guidelines for gambling responsibly. All presentations are free of charge and include information about the resources available in Missouri for residents who have a gambling problem, or loved one with a gambling problem.

⁶ Visit <http://www.cdc.gov/brfss/index.htm> for additional information about the BRFSS.

⁷ 2004 marks the second RGEM. To our knowledge, Missouri is the only state to set aside one month to highlight awareness activities promoting problem gambling outreach and education. In 1999, Missouri was also the first state in the country to set aside a week to promote responsible gaming and to educate its residents about the programs available to help problem gamblers.

⁸ The AGA Code of Conduct for Responsible Gambling was enacted September 2003 by the AGA Board of Directors. For more information, visit http://www.americangaming.org/programs/responsiblegaming/code_public.cfm

⁹ To request a presentation or exhibit for your event, please contact Melissa Stephens at 573-526-4080.